

CLAIMS ONLY								Application Number		Filing Date			
								Applicant(s)					
								* May be used for additional claims or amendments					
CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT			Indep	Depend	Indep	Depend	Indep	Depend
	Indep	Depend	Indep	Depend	Indep	Depend							
(1)	1							51					
2		1						52					
3		X	1					53					
4		X	1					54					
5		1						55					
6		1						56					
7		1						57					
8		X	1					58					
9		X	1					59					
10		X	1					60					
11		1						61					
12		1						62					
13		1						63					
14		X	1					64					
15		X	1					65					
16		1						66					
17		1						67					
18		X	1					68					
19		X	1					69					
20		1						70					
21		X	1					71					
22		1						72					
23		1						73					
24		X	1					74					
25		1						75					
26		1						76					
27		1						77					
28		1						78					
29		1						79					
30		X	1					80					
31		1						81					
32		1						82					
33		X	1					83					
34		1						84					
35		1						85					
(36)		1						86					
37		1						87					
38		1						88					
39		X	1					89					
40		X	1					90					
(41)		1						91					
42		1						92					
43		X	1					93					
44		1						94					
45		X	1					95					
46		1						96					
47		1						97					
48		1						98					
49		1						99					
50		1						100					
Total Indep	2							Total Indep					
Total Depend	41							Total Depend					
Total Claims	45							Total Claims					

45
24